



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE**  
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<b>SERIAL NUMBER</b> 09/525,185	<b>FILING DATE</b> 03/14/2000 <b>RULE</b> -	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2734	<b>ATTORNEY DOCKET NO.</b> 1744.0450002
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**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLN CLAIMS BENEFIT OF 60/124,376 03/15/1999  
 WHICH CLAIMS BENEFIT OF 60/177,381 01/24/2000  
 WHICH CLAIMS BENEFIT OF 60/171,502 12/22/1999  
 WHICH CLAIMS BENEFIT OF 60/177,705 01/24/2000  
 WHICH CLAIMS BENEFIT OF 60/129,839 04/16/1999  
 WHICH CLAIMS BENEFIT OF 60/158,047 10/07/1999  
 WHICH CLAIMS BENEFIT OF 60/171,349  
 WHICH CLAIMS BENEFIT OF 60/177,702 01/24/2000  
 WHICH CLAIMS BENEFIT OF 60/180,667 02/07/2000  
 WHICH CLAIMS BENEFIT OF 60/171,496 12/22/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 05/18/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 191	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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**TITLE**

Spread spectrum applications of universal frequency translation

<b>FILING FEE RECEIVED</b> 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees								
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